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## UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	NECF 17.638A	
First Inventor	M. MIYASAKA	CL
Title	ELECTRON BEAM EXPOSURE	
Express Mail Label No.	EV332274582US	-

(any ter non-non-providental approduction and are at 11 mod(a))	Express Mail Laber No.									
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO:  Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450									
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27.  3. Specification [Total Pages 28 ] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Reader Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. Paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS									
- Claim(s) - Abstract of the Disclosure	ACCOMINANTING AND EIGHTON FARTO									
4.  Drawing(s) (35 U.S.C. 113) [Total Sheets 9]  5. Oath or Declaration [Total Sheets 1]  a. Newly executed (original or copy)  b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)  i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s)	9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Preliminary Amendment 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122									
name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).										
6. Application Data Sheet. See 37 CFR 1.76	(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. PRIORITY CLAIM Other:									
18. If a CONTINUING APPLICATION, check appropriate box, and supp	ly the requisite information below and in the first sentence of the									
specification following the title, or in an Application Data Sheet under 37 CFR 1.76:  Continuation  Divisional  Continuation-in-part (CIP)  of prior application No.:  Prior application information:  Examiner  S.R. MOHAMEDULLA  Art Unit:  1756  For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.  The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.										
19. CORRESPOND	ENCE ADDRESS									
Customer Number: 026304	OR Correspondence address below									
Name	The state of the s									
Address										
City	State Zip Code									
Country	lephone Fax									
Name (Print/Type) A Michael I. Markowitz	Registration No. (Attorney/Agent) 30,659									
Signature Miskal Makeun	Date 09/08/2003									

This collection of information by required by 97°CFR 1153(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (01-03)
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FEE TRANSMITTAL for FY 2003			Complete if Known						
			Application Number						
			Filing Date						
Patent fees are subject to annual revision.	ı	First Named Inventor			ntor	M. MIYASAKA			
Applicant claims small entity status. See 37 CFR 1.27			Examiner Name						
		Art U	nit						
TOTAL AMOUNT OF PAYMENT (\$) 750.00		Attorney Docket No. NEC					F 17.638A		
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
Check Credit card Money Other None	3. ADDITIONAL FEES								
Deposit Account:		Entity							
Deposit 50-1290	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee	Description	n	Fee Paid	
Number	1051	130	2051		Surcharge - lat	e filing fee or	oath	10010	
Deposit Account Katten Muchin Zavis Rosenman	1052	50	2052	25	Surcharge - lat cover sheet	arge - late provisional filing fee or			
Name The Commissioner is authorized to: (check all that apply)	1053	130	1053	130	Non-English sp	ecification			
Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	2,520	For filing a requ	ng a request for ex parte reexamination			
Charge any additional fee(s) during the pendency of this application	1804	920*	1804	920*	Requesting put Examiner actio	uesting publication of SIR prior to			
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting pul	uesting publication of SIR after			
FEE CALCULATION	1251	110	2251	55	Extension for r	eply within fire	st month		
1. BASIC FILING FEE	1252	410	2252	205	Extension for r	eply within se	econd month		
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	1253	930	2253	465	Extension for r	eply within thi	ird month		
Fee Fee Fee Fee Pee Paid Code (\$) Code (\$)	1254	1,450	2254	725	Extension for r	eply within for	urth month		
1001 750 2001 375 Utility filing fee 750.00	1255	1,970	2255	985	Extension for r	eply within fift	th month		
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appe	al			
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in	support of ar	n appeal		
1004 750 2004 375 Reissue filing fee	1403	280	2403		Request for ora	al hearing			
1005 160 2005 80 Provisional filing fee		1,510		1,510	Petition to insti-	n to institute a public use proceeding			
SUBTOTAL (1) (\$) 750.00	1452	110	2452	55	Petition to reviv	on to revive - unavoidable			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	!	1,300	2453	650		on to revive - unintentional			
Fee from  Ext <u>ra Claims below</u> Fee Paid	1501 1502	1,300 470	2501 2502	650	Utility issue fee				
Total Claims 7 -20** = X 18.00 = 0.00	1502	630	2502	235 315	Plant issue fee	n issue fee			
Independent 1 - 3** = x 84.00 = 0.00	1460	130	1460	130		issue fee			
Multiple Dependent	1807	50	1807			essing fee under 37 CFR 1.17(q)			
Large Entity   Small Entity	1806	180	1806		Submission of				
Fee Fee Fee <u>Fee Description</u> Code (\$)					Recording each				
1202 18 2202 9 Claims in excess of 20	8021	40	8021	40	property (times	number of pr	roperties)		
1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	3/5	Filing a submis (37 CFR 1.129		al rejection		
1203 280 2203 140 Multiple dependent claim, if not paid 1204 84 2204 42 ** Reissue independent claims	1810	750	2810	375	For each additi				
over original patent	1801	750	2801	375	Request for C		' I		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		900	1802	900		est for expedited examination design application			
SUBTOTAL (2) (\$) 0.00	Other	Other fee (specify)							
**or number previously paid, if greater; For Reissues, see above	*Redu	duced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00						0.00	
SUBMITTED BY (Complete (if applicable)									
Name (Print/Type) All Michael I. Markowitz		egistration No. 30,659 Telephone (212) 940-					-8800		
Signature DA all sure		Attorney/Agent)							
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